Notice of Exempt
Offering of Securities

U.S. Securities and Exchange Commission

Washington, DC 20549

(See instructions beginning on page 5)

OMB APPROVAL
OMB Number: 3235-0076
Expires: February 28, 2009
Estimated average burden hours per response: 4.00

Intentional misstatements or omissions of fact constitute federal criminal violations. See 18 U.S.C. 1001.

Item 1. Issuer's Identity		
Name of Issuer	Previous Name(s) X None ()	Entity Type (Select one)
Salient Absolute Return Fund, L.P.	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Corporation
Jurisdiction of Incorporation/Organization		Em Nin.
Delaware	7	Limited Liability Company
Delawale		General Partnership
Year of Incorporation/Organization		Business Trust
(Select one)	We start	Other (Specify)
Over Five Years Ago Within Last Five Ye (specify year)	2008 Yet to Be Formed	19
(If more than any legion is filling this notice sho	ck this box and identify additional issuer(s) by	vattachina Items 1 and 2 Continuation Page(s)
Item 2. Principal Place of Business a		attaciming items 7 and 2 continuations agrees,
Street Address 1	Street Address 2	PPACESED
4265 San Felipe, 8th Floor		0.000
	State/Province/Country ZIP/Postal Code	Phone No. MAR 2 2003
	Texas 77027	(713) 993-467500 ACON DELITERS
	7,702,	
Item 3. Related Persons		
Last Name	First Name	Middle Name
Sherman	Arthur	Наад
Street Address 1	Street Address 2	
4265 San Felipe, 8th Floor		
City S	tate/Province/Country ZIP/Postal Code	
Houston	exas 77027	1 (1 () () () () () () () () (
Relationship(s): X Executive Officer	Director Promoter	09002970
· <u> </u>	Director	
Clarification of Response (if Necessary)		
•	additional related persons by checking this box	and attaching Item 3 Continuation Page(s).)
Item 4. Industry Group (Select or	· · · · · · · · · · · · · · · · · · ·	
Agriculture	Business Services	Construction
Banking and Financial Services Commercial Banking	Energy Electric Utilities	REITS & Finance
Insurance	Energy Conservation	Residential
Investing	Coal Mining	Other Real Estate
Investment Banking	Environmental Services	Retailing
Pooled Investment Fund	Oil & Gas	Restaurants
If selecting this industry group, also select	one fund Other Energy	Technology
type below and answer the question belo	w: Health Care	Computers Telecommunications
Hedge Fund	Biotechnology	\sim
Private Equity Fund	Health Insurance	Other Technology
Venture Capital Fund	Hospitals & Physcians	Travel
 Other Investment Fund 	Pharmaceuticals	Airlines & Airports
Is the issuer registered as an investment Cor	Other realth care	Lodging & Conventions
Act of 1940? Yes No	Manufacturing	Tourism & Travel Services Other Travel
Other Banking & Financial Services	Real Estate	_
•	Commercial	Other

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Revenue Range (for issuer not specifying "hedge" or "other investment" fund in Item 4 above)			t Asset Value Range (for issuer edge" or "other investment" fund in
 No Revenues \$1 - \$1,000,000 \$1,000,001 - \$5,000,000 \$5,000,001 - \$25,000,000 \$25,000,001 - \$100,000,000 Over \$100,000,000 Decline to Disclose 	OR	 No A \$1 - \$5,0 \$25, \$50, Ove Dec 	Aggregate Net Asset Value \$5,000,000 00,001 - \$25,000,000 000,001 - \$50,000,000 000,001 - \$100,000,000 r \$100,000,000
 Not Applicable Item 6. Federal Exemptions and Exclusions Clair 	imad (S	Not elect all that a	Applicable
Rule 504(b)(1) (not (i), (ii) or (iii)) Rule 504(b)(1)(i) Rule 504(b)(1)(ii) Rule 504(b)(1)(iii) Rule 505 Rule 506 Securities Act Section 4(6) tem 7. Type of Filing New Notice OR • Amendment of First Sale in this Offering: January, 2009	Section 3	c)(2) c)(3) (c)(4) (c)(5) (c)(6)	Section 3(c)(9) Section 3(c)(10) Section 3(c)(11) Section 3(c)(12) Section 3(c)(13) Section 3(c)(14)
tem 8. Duration of Offering Does the issuer intend this offering to last more than	one year?	⋉ Yes	□ No
	all that app	-	
Equity Debt Option, Warrant or Other Right to Acquire Another Security Security to be Acquired Upon Exercise of Option, Warrant or Other Right to Acquire Security	☐ Tenar	d Investment Fui t-in-Common Se al Property Secu (Describe)	ecurities
tem 10. Business Combination Transaction			
Is this offering being made in connection with a busing transaction, such as a merger, acquisition or exchange offet Clarification of Response (if Necessary)		on Yes	⊠ No

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Item 11. Minimum Investment Minimum investment accepted from any outside investor \$ |500,000, subject to General Partner waiver Item 12. Sales Compensation Recipient Recipient CRD Number SMH Capital, Inc. No CRD Number 20580 None (Associated) Broker or Dealer CRD Number (Associated) Broker or Dealer 1961685 No CRD Number Ronnie Brown **Street Address 1** Street Address 2 12320-3 Hwy. 44, Suite B State/Province/Country ZIP/Postal Code 70737 Gonzales Louisiana States of Solicitation All States AL DC laκ AZ AR CA CO CT DE FL GΑ HI] ID ∏ мо IL in [□IA KS KY X LA ME MA MI MN ∏MS Пон MT NE NH Ŋ NM NY NC ND OK OR PA NV RI □ sc UT ∏ VT □ VA ☐ WA \square w ☐ WY □ PR SD TN TX ∏ WI (Identify additional person(s) being paid compensation by checking this box 🔲 and attaching Item 12 Continuation Page(s).) Item 13. Offering and Sales Amounts \$ (a) Total Offering Amount OR X Indefinite (b) Total Amount Sold 27,734,226,76 (c) Total Remaining to be Sold OR X Indefinite (Subtract (a) from (b)) Clarification of Response (if Necessary) Item 14. Investors Check this box if if securities in the offering have been or may be sold to persons who do not qualify as accredited investors, and enter the number of such non-accredited investors who already have invested in the offering: Enter the total number of investors who already have invested in the offering: 32 Item 15. Sales Commissions and Finders' Fees Expenses Provide separately the amounts of sales commissions and finders' fees expenses, if any. If an amount is not known, provide an estimate and check the box next to the amount. Sales Commissions \$ |0 Estimate Finders' Fees \$ 0 Estimate Clarification of Response (if Necessary)

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item	16, U8e	OT Proc	8805	

Provide the amount of the gross proceeds of the offering that has been or is proposed to b	e
used for payments to any of the persons required to be named as executive officen	i,
directors or promoters in response to Item 3 above, if the amount is unknown, provide a	ñ
estimate and check the box hext to the amount.	

\$ 416,000 per year X Estimate

Clarification of Response (if Necessary)

The Issuer pays to the General Partner a maximum management fee of 1.5% per annum of net assets, which is subject to lower percentages based on the amount of the net invested capital of the purchaser.

Signature and Submission

Please verify the information you have entered and review the Terms of Submission below before signing and submitting this notice.

Terms of Submission. In Submitting this notice, each identified issuer is:

Notifying the SEC and/or each State in which this notice is filed of the offering of securities described and undertaking to furnish them, upon written request; in accordance with applicable law, the information furnished to differees:

Irrevocably appointing each of the Secretary of the SEC and the Securities Administrator or other legally designated officer of the State in which the issuer maintains its principal place of business and any State in which this notice is filed, as its agents for service of process, and agreeing that these persons may accept service on its behalf, of any notice, process or pleading, and further agreeing that such service may be made by registered or certified mail, in any Federal or state action, administrative proceeding, or arbitration brought against the issuer in any place subject to the jurisdiction of the United States, if the action, proceeding or arbitration (a) arises out of any activity in connection with the offering of securities that is the subject of this notice, and (b) is founded, directly or indirectly, upon the provisions of: (i) the Securities Act of 1933, the Securities Exchange Act of 1934, the Trust Indenture Act of 1939, the Investment Company Act of 1940, or the Investment Advisers Act of 1940, or any rule or regulation under any of these statutes; or (ii) the laws of the State in which the Issuer maintains its principal place of business or any State in which this notice is filed.

Certifying that, if the issuer is claiming a Rule 505 exemption, the issuer is not disqualified from relying on <u>Rule 505 for one of</u> the reasons stated in Rule 505(b)(2)(iii).

This undertaking does not affect any limits Section 102(a) of the National Securities Markets improvement Act of 1996 ("NSMIA") [Pub. L. No. 104-299, 110 Stat. 3416 (Oct. 11, 1996)] imposes on the ability of States to require information. As a result, if the securities that are the subject of this Form D are "covered securities" for purposes of NSMIA, whether in all instances or due to the nature of the offering that is the subject of this Form D, States cannot routinely require offering materials under this undertaking or otherwise and can require offering materials only to the extent MSMIA permits them to do so under NSMIA's preservation of their anti-fraud authority.

Each Identified Issuer has read this notice, knows the contents to be true, and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person. (Check this box ____ and attach Signature Continuation Pages for signatures of Issuers identified in Item 1 above but not represented by signer below.)

Issuer(s)	Name of Signer
Sallent Absolute Return Fund, L.P.	Sallent Capital Management, LLC, general partner of Salient
Signatura /	Advisors, L.P., the general partner of Salient Title Absolute Return Fund, L.P.
By: A. Haag Sherman Number of continuation pages attached:	Authorized Agent of Salient Capital Management, LLC, general partner of Salient Advisors, L.P., the general partner of Salient Absolute Return Fund, L.P., February 13,2009

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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Item 3 Continuation Page

Last Name	First Name		Middle Name
Blaisdell	John		Arthur
Street Address 1		Street Address 2	
4265 San Felipe, 8th Floor			
lity	State/Province/Country	ZIP/Postal Code	
Houston	Texas	77027	
Relationship(s): X Executive Office	r 💢 Director 🔲 Promoter		
Clarification of Response (if Necessary)			
Last Name	First Name		Middle Name
Linbeck	Andrew		Baird
Street Address 1	, andrew	Street Address 2	
4265 San Felipe, 8th Floor			
City	State/Province/Country	ZIP/Postal Code	
Houston	Texas	77027	
	X Director Promoter		
Relationship(s): X Executive Office			
Relationship(s): X Executive Office Clarification of Response (if Necessary)			
_			
_	First Name		Middle Name
Clarification of Response (if Necessary)			Middle Name Lawrence
Clarification of Response (if Necessary) Last Name	First Name Jeremy	Street Address 2	
Clarification of Response (if Necessary) Last Name Radcliffe		Street Address 2	
Clarification of Response (if Necessary) Last Name Radcliffe Street Address 1		Street Address 2 ZIP/Postal Code	
Clarification of Response (if Necessary) Last Name Radcliffe Street Address 1 4265 San Felipe, 8th Floor	Jeremy		
Clarification of Response (if Necessary) Last Name Radcliffe Street Address 1 4265 San Felipe, 8th Floor City Houston	State/Province/Country Texas	ZIP/Postal Code	
Clarification of Response (if Necessary) Last Name Radcliffe Street Address 1 4265 San Felipe, 8th Floor City Houston Relationship(s): X Executive Office	State/Province/Country Texas	ZIP/Postal Code	
Clarification of Response (if Necessary) Last Name Radcliffe Street Address 1 4265 San Felipe, 8th Floor City Houston	State/Province/Country Texas	ZIP/Postal Code	
Clarification of Response (if Necessary) Last Name Radcliffe Street Address 1 4265 San Felipe, 8th Floor City Houston Relationship(s): X Executive Office Clarification of Response (if Necessary)	State/Province/Country Texas Promoter	ZIP/Postal Code	Lawrence
Clarification of Response (if Necessary) Last Name Radcliffe Street Address 1 4265 San Felipe, 8th Floor City Houston Relationship(s): X Executive Office	State/Province/Country Texas	ZIP/Postal Code	
Clarification of Response (if Necessary) Last Name Radcliffe Street Address 1 4265 San Felipe, 8th Floor City Houston Relationship(s): X Executive Office Clarification of Response (if Necessary)	State/Province/Country Texas Promoter	ZIP/Postal Code 77027	Lawrence
Clarification of Response (if Necessary) Last Name Radcliffe Street Address 1 4265 San Felipe, 8th Floor City Houston Relationship(s): X Executive Office Clarification of Response (if Necessary)	State/Province/Country Texas Promoter	ZIP/Postal Code	Lawrence
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Clarification of Response (if Necessary) Last Name Radcliffe Street Address 1 4265 San Felipe, 8th Floor City Houston Relationship(s): X Executive Office Clarification of Response (if Necessary) Last Name Street Address 1	State/Province/Country Texas Promoter First Name	ZIP/Postal Code 77027 Street Address 2	Lawrence
Clarification of Response (if Necessary) Last Name Radcliffe Street Address 1 4265 San Felipe, 8th Floor City Houston Relationship(s): X Executive Office Clarification of Response (if Necessary) Last Name Street Address 1	State/Province/Country Texas Promoter First Name State/Province/Country	ZIP/Postal Code 77027 Street Address 2	Lawrence
Clarification of Response (if Necessary) Last Name Radcliffe Street Address 1 4265 San Felipe, 8th Floor City Houston Relationship(s): X Executive Office Clarification of Response (if Necessary) Last Name Street Address 1 City	State/Province/Country Texas Promoter First Name State/Province/Country	ZIP/Postal Code 77027 Street Address 2	Lawrence